

# TRANSMITTAL FORM

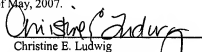
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|----------------------|-------------------|
| Application Number   | 10/729,517        |
| Filing Date          | December 5, 2003  |
| First Named Inventor | Brian D. Oxman    |
| Group Art Unit       | 2162              |
| Examiner Name        | Giovanna B. Colan |
| Attorney Docket No.  | FID-010US         |
| Patent No.           | Not applicable    |
| Issue Date           | Not applicable    |

## ENCLOSURES (check all that apply)

|   |  |  |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form<br><br><input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]<br><br><input type="checkbox"/> Petition for Extension of Time<br><br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Copies of IDS Citations (C1 thru C13)<br><br><input type="checkbox"/> Certified Copy of Priority<br><br><input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)<br><br><input type="checkbox"/> Replacement Drawing(s)<br><br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><br><input type="checkbox"/> Small Entity Statement<br><br><input type="checkbox"/> CD(s) for large table or computer program<br><br><input type="checkbox"/> Amendment After Allowance | <input type="checkbox"/> Request for Certificate of Correction<br><br><input type="checkbox"/> Certificate of Correction<br><br><input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><br><input type="checkbox"/> Appeal Brief (in triplicate)<br><br><input type="checkbox"/> Status Inquiry<br><br><input type="checkbox"/> Return Receipt Postcard<br><br><input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)<br><input checked="" type="checkbox"/> Notice of Appeal from the Examiner to The Board of Patent Appeals and Interferences |
|---|--|--|

## CERTIFICATE OF ELECTRONIC TRANSMISSION

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, are being electronically filed on this 11th day of May, 2007.

  
Christine E. Ludwig

## CORRESPONDENCE ADDRESS

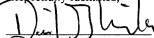
Direct all correspondence to: Patent Administrator  
Proskauer Rose LLP  
One International Place  
Boston, MA 02110-2600  
Tel. No.: (617) 526-9600  
Fax No.: (617) 526-9899

## SIGNATURE BLOCK

Date: May 11, 2007  
Reg. No.: 42,898

Tel. No.: (617) 526-9620  
Fax No. (617) 526-9899

Respectfully submitted,

  
David G. Miranda  
Attorney for the Applicants  
Proskauer Rose LLP  
One International Place  
Boston, MA 02110